

Bureau of Prisons Health Services Clinical Encounter

Inmate Name: MANCINI, MARIO FERBO
Date of Birth: 02/23/1972
Encounter Date: 05/17/2010 10:55

Sex: M
Provider: Albu-Gardner, Nikki MLP

Reg #: 11007-041
Race: WHITE
Facility: MNA

Chronic Care Visit (Not Assigned) encounter performed at Health Services.

SUBJECTIVE:

COMPLAINT 1 **Provider:** Albu-Gardner, Nikki MLP

Chief Complaint: NEUROLOGY

Subjective: 38 year old with h/o neuropathy of C-7 into right arm and 4th and 5th digits. Also complaining of snoring, cellies are complaining. He denies waking up out of breath, further denies waking up with headaches.

Pain Location: Neck-Back

Pain Scale: 9

Pain Qualities: Deep | Pins and Needles | Sharp | Stabbing

History of Trauma: Yes

When: 2001

Injury: work related

Mechanism: overuse syndrome

Onset: 5+ Years

Duration: 1-5 Hours

Exacerbating Factors: sleeping position

Relieving Factors: medication

Comments:

OBJECTIVE:

Temperature:

Date	Time	Fahrenheit	Celsius	Location	Provider
05/17/2010	11:18 MNA	97.9	36.6		Albu-Gardner, Nikki MLP

Pulse:

Date	Time	Rate Per Minute	Location	Rhythm	Provider
05/17/2010	11:18	57			Albu-Gardner, Nikki MLP

Respirations:

Date	Time	Rate Per Minute	Provider
05/17/2010	11:18 MNA	12	Albu-Gardner, Nikki MLP

Blood Pressure:

Date	Time	Value	Location	Position	Cuff Size	Provider
05/17/2010	11:18 MNA	128/78				Albu-Gardner, Nikki MLP

Height:

Date	Time	Inches	Cm	Provider
05/17/2010	11:18 MNA	70.0	177.8	Albu-Gardner, Nikki MLP

Weight:

Date	Time	Lbs	Kg	Waist Circum.	Provider
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Date	Time	Lbs	Kg	Waist Circum.	Provider
05/17/2010	11:18 MNA	230.0	104.3		Albu-Gardner, Nikki MLP

Exam:**General****Appearance/Nutrition**

Appears Well (yes), NAD (yes)

Pulmonary**Auscultation**

Clear to Auscultation Bilaterally (yes)

Cardiovascular**Auscultation**

Regular Rate and Rhythm (RRR) (yes), Normal S1 and S2 (yes), M/R/G (no), S3 (no), S4 (no)

Peripheral Vascular**General**

Varicosities (no), Pitting Edema (no), Hyperpigmentation (no)

Abdomen**Palpation**

Soft (yes), Non-tender on Palpation (yes), Guarding (no), Rigidity (no)

Neurologic**Motor System-General**

Normal Exam (yes), Normal Muscular Bulk (yes), Normal Muscular Tone (yes), Atrophy (no), Wasting (no)

Motor System-Strength

Normal Muscular Strength (yes), Weakness (no)

Strength-Biceps Flexion C5/C6

5-Normal Muscle Strength (yes)

Strength-Triceps Extension C6/C7/C8

5-Normal Muscle Strength (yes)

Strength-Wrist Extension C6/C7/C8 & Radial Nerve

5-Normal Muscle Strength (yes)

Grip Strength C7/C8/T1

5-Normal Muscle Strength (yes)

Strength-Finger Abduction C8/T1 & Ulnar Nerve

5-Normal Muscle Strength (yes)

Strength-Thumb Opposition C8/T1 & Medial Nerve

5-Normal Muscle Strength (yes)

Trunk Musculature Strength

5-Normal Muscle Strength (yes)

ASSESSMENT:

Description	ICD9	Status	Status Date	Progress	Type
Neuralgia neuritis, radiculitis, neuropathic pain	729.2	Current	11/12/2009	Not Improved/Same	Chronic
Health Problem Comments:					
work-related injury to neck					
Axis I: Unspecified schizophrenia	295.9	Current	11/12/2009	Improved	Chronic
Axis II: Deferred	Axis II: Deferred	Current	01/18/2010	Treatment Goal Attained	Chronic

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<u>Description</u>	<u>ICD9</u>	<u>Status</u>	<u>Status Date</u>	<u>Progress</u>	<u>Type</u>
Axis IV: Psychosocial and environmental problems	Axis IV	Current	01/18/2010	Treatment Goal Attained	Chronic
Axis V: GAF 51 - 70	G3	Current	01/18/2010	Improved	Chronic

PLAN:**New Medication Orders:**

<u>Rx#</u>	<u>Medication</u>	<u>Order Date</u>	<u>Prescriber Order</u>
	Ibuprofen Tablet	05/17/2010 10:55	600 mg Orally -three times a day x 180 day(s)
Indication: Neuralgia neuritis, radiculitis, neuropathic pain			

Renew Medication Orders:

<u>Rx#</u>	<u>Medication</u>	<u>Order Date</u>	<u>Prescriber Order</u>
36778-MNA	Gabapentin 400 MG CAP	05/17/2010 10:55	Take two capsules three times daily with 300mg tab (total dose = 1100 mg tid) ***pill line*** **crush/empty** x 180 day(s) Pill Line Only
Indication: Neuralgia neuritis, radiculitis, neuropathic pain			
36780-MNA	Gabapentin 600 MG Tab	05/17/2010 10:55	Take one-half (1/2) tablet three times daily with 800 mg tab (total dose = 1100 mg) ***pill line*** **crush/empty** x 180 day(s) Pill Line Only
Indication: Neuralgia neuritis, radiculitis, neuropathic pain			
36718-MNA	Risperidone 2 MG Tab	05/17/2010 10:55	Take one tablet by mouth at bedtime ***pill line*** x 180 day(s) Pill Line Only
Indication: Axis I: Unspecified schizophrenia			

Disposition:

Follow-up at Sick Call as Needed

Follow-up at Chronic Care Clinic as Needed

Other:

Patient is stable on the current medication regime, discussed diagnosis and prognosis.

x-rays reveal mild degenerative joint disease.

CT was done approximately 1 month ago and results not available.

Patient Education Topics:

<u>Date Initiated</u>	<u>Format</u>	<u>Handout/Topic</u>	<u>Provider</u>	<u>Outcome</u>
05/17/2010	Counseling	Access to Care	Albu-Gardner, Nikki	Verbalizes Understanding
05/17/2010	Counseling	Plan of Care	Albu-Gardner, Nikki	Verbalizes Understanding

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Date Initiated FormatHandout/TopicProviderOutcome**Copay Required:**No**Cosign Required:** Yes**Telephone/Verbal Order:** No

Completed by Albu-Gardner, Nikki MLP on 05/17/2010 11:57

Requested to be cosigned by Toledo, Ernesto MD.

Cosign documentation will be displayed on the following page.